

**Purpose** Consisting of 24 statements regarding obstructive sleep apnea (OSA), the instrument targets nine different dimensions of belief about the disorder, including: perceived impact of OSA, outcome expectations, continuous positive airway pressure (CPAP) acceptance, and willingness to ask for help. Smith and colleagues [1] designed the questionnaire as a tool for investigating treatment compliance in apneic individuals. As some have postulated that more positive beliefs and attitudes about OSA treatment are associated with improved compliance, higher scores on the test may be linked to a greater commitment to the treatment process. Further research will hopefully illuminate this potential relationship more clearly. For a similar tool, see the Apnea Knowledge Test (Chap. 4).

**Population for Testing** The test's developers did not specify an age range for administration. However, in a study evaluating the tool's psychometric properties, most participants were middle aged (mean age,  $52.6 \pm 12.6$  SD). A reading ability at approximately the sixth grade level is required for comprehension.

**Administration** The pencil-and-paper scale requires approximately 5–10 min for completion by patient respondents.

**Reliability and Validity** Smith et al. [1] conducted an initial evaluation of the test's psychometric properties and found it had modest internal reliability (Cronbach's  $\alpha = .75$ ).

**Obtaining a Copy** A published copy can be found in the original study conducted by Smith and colleagues [1].

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**Scoring** On a Likert-type scale, respondents are asked to indicate the extent to which they agree with certain statements. The scale ranges from 1 ("strongly agree") to 5 ("strongly disagree"), with half of the items worded negatively in order to prevent a response bias. To evaluate results, negative items are reversed and a total score is calculated. Higher totals indicate more positive treatment beliefs and attitudes, which may be a marker of improved compliance.

ABS

Answer each of these questions by shading the number that best represents your answer.

①	②	③	④	⑤
Strongly disagree	Disagree	Not sure / neutral	Agree	Strongly agree
<hr/>				
Sleep apnea has no effect on my life				
<hr/>				
If things become too much I generally don't go through with them				
<hr/>				
CPAP is "the answer" to my sleep apnea				
<hr/>				
Sleep apnea gets in the way of my friendships				
<hr/>				
I intend to use the CPAP machine all night every night.				
<hr/>				
I believe using the CPAP mask will be a nuisance				
<hr/>				
I am willing to ask for help when it is required				
<hr/>				
CPAP is the best treatment for my health problems				
<hr/>				
I am willing to follow the directions of medical staff "to the letter"				
<hr/>				
I believe that using CPAP is very confusing				
<hr/>				
Wearing the CPAP mask will make falling asleep hard				
<hr/>				
Once I make a decision, I stick with that decision				
<hr/>				
Wearing the CPAP mask will improve the quality of my sleep				
<hr/>				
I find it stressful to use new machinery or technology				
<hr/>				
Good health is secondary to being able to do what I want in life				
<hr/>				
I enjoy trying new things, like snorkelling				
<hr/>				
I don't believe I have a sleep problem				
<hr/>				
I find it embarrassing to ask for help				
<hr/>				
Sleep apnea is my major health problem				
<hr/>				
I believe that CPAP will make little difference to my sleep				
<hr/>				
I want to improve my health				
<hr/>				
I am confident that I will be able to use the CPAP machine as taught				
<hr/>				
I would try anything that I thought might help my sleep apnea				
<hr/>				
I believe that I know what is the best treatment for me				
<hr/>				

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Reference

1. Smith, S. S., Lang, C. P., Sullivan, K. A., & Warren, J. (2004). Two new tools for assessing obstructive sleep apnea and continuous positive airway pressure therapy. *Sleep Medicine*, 5, 359–367.

Representative Studies Using Scale

Smith, S. S., Lang, C. P., Sullivan, K. A., & Warren, J. (2004). A preliminary investigation of the effectiveness of a sleep apnea education program. *Journal of Psychosomatic Research*, 56(2), 245–249.